CLAIMS AS FILED - PART I (Column 1) (Column 2)										SMALL TYPE	ENTITY	OR	OTHER SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			Γ	RATE	FEE	1	RATE	FEE
BASIC FEE									Ī		345.00	OR		690.00
TOTAL CLAIMS			( 3 minus 20=			•				X\$ 9≐		OR	X\$18=	
NDEPENDENT CLAIMS			✓ minus 3 =							X39=		OR	X78=	
MULTIPL	E DEPEN	DENT C	LAIM P	RESENT						+130=			+260=	
if the di	ifference	in colu	nn 1 is	less than ze	ero, e	nter "0" ir	ı colu	nn 2		TOTAL		OR	TOTAL	690
				MENDED						IOIAL		OR	OTHER	
		(Colu	mn 1)		(C	olumn 2)	(Co	olumn:3)		SMALL	ENTITY	OR	SMALL	
Y D	18 3	REMA AF	ums uning ter		PR	HIGHEST NUMBER EVIOUSLY PAID FOR		RESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total		)	DMENT	Minus		ÄĎ	=	42	<b>/</b>	X\$ 9=	378	OR	X\$18=	184
Total Indep	pendent	•	XI -	Minus	***	Ä	=		ŀ	<del>433</del> =	112	OR	XXE T	SAN
FIRS	T PRESE	OITATIO	N OF M	ULTIPLE DEI	PEND	ENT CLA	M		ŀ				Λ	wa
									4	+130=	111	95	+260=	<b>₹</b>
									1/2	2017	1202 1	VE.	NO STATE OF THE PARTY OF THE PA	uag
	131	CL	IMN 1)			olumn 2) HIGHEST		olumn 3)	ſ		ADDI-	1		ADDI-
8 4 T	/K/1	AF	AINING TER DMENT		PF	NUMBER REVIOUSLY PAID FOR		RESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
Total			か	Minus		AID	=			X\$ 9=		OR	X\$18=	
Total Inde	pendent	•	TH	Minus	•••	"3	-	3	-	x#3	241	OR	34	
FIRS	ST PRESE	NTATIC	N OF M	ULTIPLE DE	PEND	ENT CLA	lM .		<b> </b>	<u>-h</u> -	7/1			
									1	+180=	1111	OR	+260=	
									HO	DOTAL DOINTER	*24 <u>*</u>	JOR	TOTAL ADDIT FEE	
	1: 2 k	CL	IMN 1) AIMS	137816 73		olumn 2) HIGHEST		olumn 3)			ADDI-	::::::::: }:::::::		ADDI-
Z Z	2416	AF	NNING TER		PF	NUMBER REVIOUSLY PAID FOR		RESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
Total	/ Ind (v)	AMEN	DMENT	Minus		102			ŀ	X\$ 9=	FEE		X\$18=_	FEE
z	pendent	. 1	1	Minus	•••	17	1=		<b> </b>			ØR		
FIRS	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									X39=		OR	X78=	
										+130=		OR	+260=	

FORM PTO-675

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